

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/241,455
	Filing Date	February 2, 1999
	First Named Inventor	Krivitski, Nikolai M.
	Art Unit	3736
	Examiner Name	Szmal, Brian Scott
	Attorney Docket Number	86017.000012
Total Number of Pages in This Submission		

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Amendment After Allowance 37 C.F.R. 1.312
<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Brian B. Shaw, 33,782, HARTER, SECREST & EMERY LLP
Signature	
Date	March 11, 2005

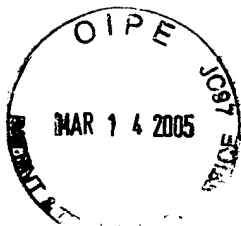
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Type or printed name	Holly M. Smith		
Signature		Date	March 11, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



TR
B

PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Confirmation No: 8764

Applicant: Krivitski, Nikolai M.

Atty. Docket: 86017.000012

Serial No.: 09/241,455

Examiner: Szmal, Brian Scott

Filed: February 2, 1999

Art Unit: 3736

Title: METHOD AND APPARATUS FOR DETERMINING A BLOOD FLOW DURING A
VASCULAR CORRECTIVE PROCEDURE

AM E N D M E N T AFTER ALLOWANCE UNDER 37 C.F.R. 1.312

Mail Stop Non-Fee Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

This communication is filed in response to the Notice of Allowance mailed
January 7, 2005. Please amend the application as follows:

In the Title:

Please correct the title from ACCESS DYSFUNCTION to METHOD AND APPARATUS FOR DETERMINING A BLOOD FLOW DURING A VASCULAR CORRECTIVE PROCEDURE.